

# TRANSMITTAL FORM

|                           |                      |
|---------------------------|----------------------|
| Application Serial Number | 10/309,808           |
| Filing Date               | MARCH 26, 2004       |
| First Named Inventor      | BORIS MASLOV, ET AL. |
| Group Art Unit            | 2837                 |
| Examiner Name             | COLON SANTANA, E.    |
| Attorney Docket No.       | 76897-018CIP6        |
| Patent No.                | Not applicable       |
| Issue Date                | Not applicable       |

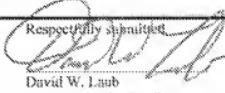
## ENCLOSURES (check all that apply)

|                                                                                                  |                                                                                                              |                                                                                                                                                |
|--------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Fee Transmittal Form                                         | <input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553)                      | <input type="checkbox"/> Request for Certificate of Correction                                                                                 |
| <input type="checkbox"/> <input type="checkbox"/> Check Attached                                 | <input type="checkbox"/> Formal Drawing(s)                                                                   | <input type="checkbox"/> <input type="checkbox"/> Certificate of Correction (in duplicate)                                                     |
| <input type="checkbox"/> Copy of Fee Transmittal Form                                            | <input checked="" type="checkbox"/> Request For Continued Examination (RCE) Transmittal                      | <input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences                                                         |
| <input checked="" type="checkbox"/> Amendment/Response                                           | <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)                                      | <input type="checkbox"/> Appeal Brief (in triplicate)                                                                                          |
| <input type="checkbox"/> <input type="checkbox"/> Preliminary After Final                        | <input type="checkbox"/> Terminal Disclaimer                                                                 | <input type="checkbox"/> Status Inquiry                                                                                                        |
| <input type="checkbox"/> <input type="checkbox"/> Affidavits/declaration(s)                      | <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application | <input type="checkbox"/> Return Receipt Postcard                                                                                               |
| <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets _____] | <input type="checkbox"/> Small Entity Statement                                                              | <input type="checkbox"/> Certificate of Fasimile Transmission under 37 C.F.R. 1.8                                                              |
| <input checked="" type="checkbox"/> Petition for Extension of Time (1 month)                     | <input type="checkbox"/> CD(s) for large table or computer program                                           | <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below)<br>Computer Generated English Translation of 2002-186120 A |
| <input type="checkbox"/> Information Disclosure Statement                                        | <input type="checkbox"/> Amendment After Allowance                                                           |                                                                                                                                                |
| <input type="checkbox"/> <input type="checkbox"/> Form PTO-1449 Copies of IDS Citations          |                                                                                                              |                                                                                                                                                |
| <input type="checkbox"/> Certified Copy of Priority Document(s)                                  |                                                                                                              |                                                                                                                                                |
| <input type="checkbox"/> Sequence Listing submission                                             |                                                                                                              |                                                                                                                                                |
| <input type="checkbox"/> <input type="checkbox"/> Paper Copy/CD                                  |                                                                                                              |                                                                                                                                                |
| <input type="checkbox"/> <input type="checkbox"/> Computer Readable Copy                         |                                                                                                              |                                                                                                                                                |
| <input type="checkbox"/> <input type="checkbox"/> Statement verifying identity of above          |                                                                                                              |                                                                                                                                                |

## CORRESPONDENCE ADDRESS

Direct all correspondence to: PATENT ADMINISTRATOR  
Proskauer Rose LLP  
1001 Pennsylvania Ave., N.W.  
Suite 400  
Washington, D.C. 20004  
Tel No.: (202) 416-6800  
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CUSTOMER NO: 61263

## SIGNATURE BLOCK

Respectfully submitted,  
  
 David W. Laub  
 Attorney for the Applicant(s)  
 Proskauer Rose LLP  
 1001 Pennsylvania Ave., N.W.  
 Suite 400  
 Washington, D.C. 20004

**FEE TRANSMITTAL**  
FY 2006

| <i>Complete if Known</i> |                      |
|--------------------------|----------------------|
| Application Serial No.   | 10/809,808           |
| Filing Date              | MARCH 26, 2004       |
| First Named Inventor     | BORIS MASLOV, ET AL. |
| Group No.                | 2837                 |
| Examiner Name            | COLON SANTANA, E.    |
| Confirmation No.         | 7953                 |

**METHOD OF PAYMENT**

Payment Enclosed  
 Check  Money Order  Other

The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 50-3840  
 Required Fees (copy of this sheet enclosed).  
 Additional fee required under 37 CFR 1.16 and 1.17  
 Overpayment Credit.

Applicant claims small entity status.

**FEES CALCULATION**

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

| Application Type | Filing | Search | Examination | Fee Paid |
|------------------|--------|--------|-------------|----------|
| Utility          | 300    | 500    | 200         |          |
| Design           | 200    | 100    | 130         |          |
| Plant            | 260    | 300    | 160         |          |
| Reissue          | 300    | 500    | 600         |          |
| Provisional      | 200    | 0      | 0           |          |

*Small Entity Discount*

**2. EXCESS CLAIM FEES**

|                                                                                                         | Fee          | Small Entity Fee (\$) |
|---------------------------------------------------------------------------------------------------------|--------------|-----------------------|
| Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent            | 50           | 25                    |
| Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent | 200          | 100                   |
| Total Claims                                                                                            | Extra Claims | Fee Paid (\$)         |
| - 20 or HP=                                                                                             |              |                       |

HP = highest number of total claims paid for, if greater than 20

| Independent Claims | Extra Claims | Fee Paid (\$) |
|--------------------|--------------|---------------|
| - 3 or HP=         |              |               |

| Multiple Dependent Claims | Fee (\$) | Small Entity fee (\$) | Fee Paid (\$) |
|---------------------------|----------|-----------------------|---------------|
|                           | 360      | 180                   |               |

**2. TOTAL:**

**3. APPLICATION SIZE FEE**

If the specification and drawing exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional sheets or fraction thereof. See 35 U.S.C. 411(a)(G) and 37 CFR 1.16(s).

| Total Sheets | Extra Sheets | Additional 50 or fraction thereof | Fee (\$)     | Fee Paid |
|--------------|--------------|-----------------------------------|--------------|----------|
| -160m        | 0            | /50m                              | whole number | x = 0.00 |

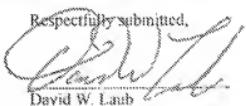
**3. TOTAL:**

**CORRESPONDENCE ADDRESS**

Direct all correspondence to:

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 Proskauer Rose LLP  
 1601 Pennsylvania Avenue, N.W., Suite 400  
 Washington, D.C. 20004  
 Tel. No. (202) 416-6800  
 Fax No. (202) 416-6899  
 CUSTOMER NO. 61263

**FEES CALCULATION (continued)**

| <b>4. ADDITIONAL FEES</b>                                                                                                                                                                                                                             |                                   |                                                                |                   |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|----------------------------------------------------------------|-------------------|
| Large Entity Fee (\$)                                                                                                                                                                                                                                 | Small Entity Fee (\$)             | Fee Description                                                | Fee Paid          |
| 130                                                                                                                                                                                                                                                   | 65                                | Surcharge - late filing fee or oath                            |                   |
| 50                                                                                                                                                                                                                                                    | 25                                | Surcharge - late provisional filing fee or cover sheet         |                   |
| 130                                                                                                                                                                                                                                                   | 130                               | Non-English specification                                      |                   |
| 2,520                                                                                                                                                                                                                                                 | 2,520                             | Request for ex parte re-examination                            |                   |
| 120                                                                                                                                                                                                                                                   | 60                                | Extension for reply within 1 <sup>st</sup> mo.                 | 60.00             |
| 450                                                                                                                                                                                                                                                   | 225                               | Extension for reply within 2 <sup>nd</sup> mo.                 |                   |
| 1,020                                                                                                                                                                                                                                                 | 510                               | Extension for reply within 3 <sup>rd</sup> mo.                 |                   |
| 1,590                                                                                                                                                                                                                                                 | 795                               | Extension for reply within 4 <sup>th</sup> mo.                 |                   |
| 2,160                                                                                                                                                                                                                                                 | 1,080                             | Extension for reply within 5 <sup>th</sup> mo                  |                   |
| 500                                                                                                                                                                                                                                                   | 250                               | Notice of Appeal                                               |                   |
| 500                                                                                                                                                                                                                                                   | 250                               | Filing a brief in support of an appeal                         |                   |
| 1,000                                                                                                                                                                                                                                                 | 500                               | Request for oral hearing                                       |                   |
| 466                                                                                                                                                                                                                                                   | 0                                 | Petitions to the Director                                      |                   |
| 180                                                                                                                                                                                                                                                   | 180                               | Submission of IDS                                              |                   |
| 790                                                                                                                                                                                                                                                   | 395                               | Filing a submission after final rejection (37 CFR 1.129(a))    |                   |
| 790                                                                                                                                                                                                                                                   | 395                               | For each additional invention to be examined (37 CFR 1.129(b)) |                   |
| 100                                                                                                                                                                                                                                                   | 100                               | Certificate of Correction for applicant's error                |                   |
| 130                                                                                                                                                                                                                                                   | 65                                | Submission of Terminal Disclaimer                              |                   |
| Other fee (Specify)                                                                                                                                                                                                                                   | Request for Continued Examination | 395.00                                                         |                   |
| Other fee (Specify)                                                                                                                                                                                                                                   |                                   |                                                                |                   |
|                                                                                                                                                                                                                                                       |                                   | 4. TOTAL:                                                      | \$455.00          |
| <b>TOTAL AMOUNT SUBMITTED</b>                                                                                                                                                                                                                         |                                   |                                                                | <b>(\$455.00)</b> |
| <b>SIGNATURE BLOCK</b>                                                                                                                                                                                                                                |                                   |                                                                |                   |
| <br>Respectfully submitted,<br>David W. Laub<br>Attorney for the Applicant(s)<br>Proskauer Rose LLP<br>1001 Pennsylvania Ave., N.W., #400<br>Washington, D.C. 20004 |                                   |                                                                |                   |